2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004627

FILED Mar 18, 2009 Secretary of State

Entity Nai	me: HILLSBOF	ROUGH ART EDUCATION A	SSOCIATION, INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4600 W. K TAMPA, F	ENNEDY BLVE L 33609).				
Current Mailing Address:			New Maili	ng Address	:	
4600 W. K TAMPA, F	ENNEDY BLVE L 33609).				
FEI Number: 59-3669726 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()		
Name and	l Address of C	urrent Registered Agent:	Name and	Address o	f New Registered Agent:	
SALEM, A 4600 W. K TAMPA, F	LBERT M JR. ENNEDY BLVE L 33609 US					
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing	its registered	d office or registered agent, or bo	th,
SIGNATUI	RE:					
Electronic Signature of Registered Agent			ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SALEM, NANCY 3819 W. HORAT TAMPA, FL 336	09	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DANIELE, VICTO 1472 46TH AVE ST. PETERSBU	NUE NE	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () SWALLS, CATH 3148 PINE SHA LAND O LAKES	DOW DR	Title: Name: Address: City-St-Zip:	HAND, JAMI 575 24TH A\		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMIE HAND T 03/18/2009